09/21/2011 15:16

FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

•		For Ot	her Than An	Authoriz	ed Commit	tee		Office Us	e Only	
1.	NAME OF COMMITTEE (in full)		EC MAILING LAE PE OR PRINT	_	xample:If typin ver the lines	g, type		• • • • •		
L	Massachusetts Republican S	tate Con	gressional Comm	nittee						
		1 1 1		1 1 1		1 1 1 1		1 1 1 1	1 1 1	
AD	DRESS (number and street)	85 M	lerrimac St.							
	Check if different	Suite	; 400 					1 1 1 1		
L	than previously reported. (ACC)	Bosto	on 				LMA J	02	2114	
2.	FEC IDENTIFICATION NUM	IBER	~	CITY 🛕		5	STATEA	:	ZIPCODE	A
	C00042622		:	3. IS THIS REPOF		NEW (N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	. ,	Monthly X Report Due On:	Feb 20 (M	2)	May 20 (M5)		Aug 20 (M8)	L Ye	ov 20 (M11) Non-Election ear Only)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)		Sep 20 (M9)	(N	ec 20 (M12) Non-Election ear Only)
	April 15	_		Apr 20 (M	4)	Jul 20 (M7)		Oct 20 (M10)	Ja	an 31 (YE)
	Quarterly Report(Q July 15		(c) 12-Day		Primary (12	(P)	Gene	ral (12G)	R	unoff (12R)
	Quarterly Report(Q October 15		PRE -Election Report for the		Convention	(12C)	Spec	ial (12G)		
	Quarterly Report(Q January 31 Quarterly Report(Y		E	Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)		(d) 30-Day Post -Elect Report for the		General (30	0G)	Runo	ff (30R)	S	pecial (30S)
	Termination Report (TER)		·	Election on					in the State of	
5.	Covering Period 0 1		01 201	1	through	0 1	3 1	2011		
	ertify that I have examined this I	•	nd to the best of n	ny knowledg	e and belief it i	s true, correct a	and compl	ete.		
Тур	oe or Print Name of Treasurer		III Anderson							
Sig	nature of Treasurer Electron	nically Fil	led by Brent Ar	nderson		D	ate	03 13	2 (0 1 1
NO	TE : Submission of false, error	neous, or	incomplete inform	mation may	subject the per	son signing this	s Report to	the penalties	of 2 U.S.C	437g.
	Office Use							1	FORM v. 12/2004)	3X

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Massachusetts Republican State Congressional Committee D D " D 0 1 0 1 2011 0.1 3 1 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011[°] 191359.55 January 1 (b) Cash on Hand at 191359.55 Begining of Reporting Period 35714.10 35714.10 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 227073.65 227073.65 6(a) and 6(c) for Column B) 59593.70 59593.70 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 167479.95 167479.95 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 5660.20 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

м м 0 1 0 1 м°м 0 1 3 1 2011 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 17853.10 17853.10 (i) Itemized (use Schedule A) 17861.00 17861.00 (ii) Unitemized (iii) TOTAL (add 35714.10 35714.10 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 35714.10 35714.10 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 35714.10 35714.10 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 35714.10 35714.10 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures: Shared Federal/Non-Federal	1000 11101 01100	Caronida Tear-to-Date
(a)	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating	50500.70	50500 70
(0)	Expenditures	59593.70	59593.70
(c)	Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	59593.70	59593.70
	ansfers to Affiliated/Other Party		
	ommitteesontributions to	0.00	0.00
	deral Candidates/Committeesd Other Political Committees	0.00	0.00
4. Inc	dependent Expenditure	0.00	0.00
5. Čd	se Schedule E)oordinated Expenditures Made by Party		
Co (u:	ommittees (2 U.S.C. 441a(d)) se Schedule F)	0.00	0.00
6. Lo	an Repayments Made	0.00	0.00
7. In	ans Made	0.00	0.00
28. Re	efunds of Contributions To: Individuals/Persons Other		
(a _j	Than Political Committees	0.00	0.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	0.00
(d)			
	(add Lines 28(a), (b), and (c))	0.00	0.00
9. Ot	her Disbursements	0.00	0.00
0. Fe	ederal Election Activity (2 U.S.C 431(20))		
	a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(i) i caera onare	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
(I	o) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. T	otal Disbursements (add Lines 21(c), 22,		
2	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	59593.70	59593.70
	Total Federal Disbursements		
•	subtract Line 21(a)(ii) and Line 30(a)(ii)	E0502.70	E0E00.70
Ħ	rom Line 31)	59593.70	59593.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

III. Net Contributions/Operating Expenditures			
33.	Total Contributions (other than loans) from Line 11(d), page 3)	35714.10	35714.10
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	35714.10	35714.10
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	59593.70	59593.70
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	59593.70	59593.70

FE6AN026

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16		
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Massachusetts Republican State Co	I Statements may not be sold or used by any pe he name and address of any political committee	erson for the purpose of soliciting contributions		
/ Massachusells nepublican State Co	ingressional Committee			
Full Name (Last, First, Middle Initial) Nathan Bech Mailing Address 84 Summit St.	Nathan Bech			
		01 11 2011		
City	State Zip Code	Transaction ID: 10211.C187477		
West Springfield	MA 01089	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Information Requested	Occupation Information Requested	Receipt		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	250.00			
Full Name (Last, First, Middle Initial) Geo Bentley	Date of Receipt			
Mailing Address 180 Main St., Apt. B	01 19 7 2011			
City	State Zip Code	Transaction ID: 10211.C187736		
Walpole	MA 02081	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer Information Requested	Occupation Information Requested	Receipt		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	200.00			
Full Name (Last, First, Middle Initial) Lawrence Bolick		Date of Receipt		
Mailing Address 29 Farm Hill Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 10211.C187783		
Natick	MA 05552	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer Aquent, LLC	Occupation CIO	Receipt		
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Primary ☐ General Other (specify) ▼	400.00			
SUBTOTAL of Receipts This Page (optional)	1	450.00		

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, oth NAME OF COMMITTEE (In	er than using the name and ac	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Mary Braman Mailing Address PO Box 1325 March City Millis FEC ID number of contributing federal political committee. Name of Employer Information Requested	218 in Street State MA	Zip Code 02054	Date of Receipt M M M
Receipt For: Primary Other (specify)	Aggregat	tion Requested e Year-to-Date ▼ 150.00	
Full Name (Last, First, Middle Mary Braman Mailing Address PO Box 1325 Ma City Millis FEC ID number of contribution	218 in Street State MA	Zip Code 02054	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Information Aggregation	on tion Requested te Year-to-Date ▼	Receipt
Full Name (Last, First, Middle John Fitzpatrick Mailing Address PO Box 9 Prospective City Stockbridge FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary Other (specify) Other (specify)	954 ect Hill Road State MA Occupation Retired Aggregat	Zip Code 01262 on e Year-to-Date ▼ 10000.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 0 2 0 1 1 Transaction ID: 10211.C187455 Amount of Each Receipt this Period 5000.00 Receipt
SUBTOTAL of Receipts This F	Page (optional)		5150.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 31 (check only one) X 11a 11b 11c 12 12 13 14 15 16
	Statements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full) Massachusetts Republican State Co	ngressional Committee	
Full Name (Last, First, Middle Initial) M. Dozier Gardner Mailing Address 100 Upland Road		Date of Receipt
City	State Zip Code MA 02445	0 1 1 0 2 0 1 1 Transaction ID: 10211.C187457
Brookline FEC ID number of contributing federal political committee.	MA 02445	Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) John Hansen Mailing Address 55 Overlook Dr.	Date of Receipt	
City	State Zip Code	0 1 3 1 2 0 1 1 Transaction ID: 10211.C187952
Westfield	MA 01085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Jeanne Kangas		Date of Receipt
Mailing Address 959 Hill Rd		01 21 7 2011
City <u>Boxborough</u>	State Zip Code MA 01719	Transaction ID: 10211.C187751 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5250.00
Name of Employer Arnold & Kangas, P.C.	Occupation Lawyer	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 10250.00	
SUBTOTAL of Receipts This Page (optional)		6550.00

П	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS ny information copied from such Reports and S	itataments ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Oi	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Robert Lawrence Mailing Address 24 Jackson Pond Road City Dedham FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State MA C Occupation Retired	Zip Code 02026 on e Year-to-Date ▼ 2250.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Paul Leblanc Mailing Address 10 Preston Rd City Lexington FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify)	. '	Zip Code 02420 on ion Requested e Year-to-Date ▼ 320.00	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 9 2 0 1 1 Transaction ID: 10211.C187718 Amount of Each Receipt this Period 100.00 Receipt
	Full Name (Last, First, Middle Initial) Julianne Lindsay Mailing Address 81 Channing Rd City Watertown FEC ID number of contributing federal political committee. Name of Employer Eastern Bank Receipt For: Primary General Other (specify)	State MA C Occupation banker Aggregate	Zip Code 02472 on e Year-to-Date ▼ 265.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) FOTAL This Period (last page this line number		•	1265.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 31 (check only one) X 11a 11b 11c 12 13 14 15 16
	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Massachusetts Republican State Cor	ngressional Committee	
Full Name (Last, First, Middle Initial) Robert McCarthy Mailing Address 53 Outlook Road	Date of Receipt	
City	State Zip Code	0 1 2 1 2 0 1 1 Transaction ID: 10211.C187755
Wakefield FEC ID number of contributing federal political committee.	MA 01430	Amount of Each Receipt this Period 100.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
Full Name (Last, First, Middle Initial) Frederick Randall Mailing Address 10 Misses Hill Dd		Date of Receipt
Mailing Address 10 Miscoe Hill Rd.	71.0	01 24 2011
City Upton	State Zip Code MA 01568	Transaction ID: 10211.C187794 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	55.00
Name of Employer Information Requested	Occupation Owner	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Carlo Rovelli		Date of Receipt
Mailing Address 8 Hickory HI		0 1 1 1 2 0 1 1
City West Springfield	State Zip Code MA 01089	Transaction ID: 10211.C187490 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)		230.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the iled Summary Page	FOR LINE NUMBER: PAGE 11 / 31 (check only one) X 11a		
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)					
Massachusetts Republican State Co	ngressional Committ	ee			
Full Name (Last, First, Middle Initial) Judy Rowley Mailing Address 6 Myers Farm Road	Judy Rowley				
<u> </u>		01 19 2011			
City		Code	Transaction ID: 10211.C187636		
Hingham	MA 020	043	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		100.00		
Name of Employer Information Requested	Occupation Information Rec	nuested	Receipt		
Receipt For:	Aggregate Year-to	·			
Primary General Other (specify) ▼		200.00			
Full Name (Last, First, Middle Initial) Arthur Ryan	Date of Receipt				
Mailing Address 119 Mt. Pleasant Ave). 		01 10 7 2011		
City	·	Code	Transaction ID: 10211.C187458		
Gloucester	MA 019	930	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		1000.00		
Name of Employer Retired	Occupation Retired		Receipt		
Receipt For:	Aggregate Year-to-	-Date ▼			
Primary General Other (specify) ▼		3000.00			
Full Name (Last, First, Middle Initial) Glenn Sacra	1		Date of Receipt		
Mailing Address 55 Glezen Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip	Code	Transaction ID: 10211.C187621		
Wayland	MA 01	778	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		110.00		
Name of Employer Retired	Occupation Retired		Receipt		
Receipt For:	Aggregate Year-to-	-Date ▼			
Primary General Other (specify) ▼		440.00			
SUBTOTAL of Receipts This Page (optional)	<u>I</u>		1210.00		

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/31 (check only one) X
or for	nformation copied from such Reports and S commercial purposes, other than using the AME OF COMMITTEE (In Full) lassachusetts Republican State Conc	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. Ri Ma Ci <u>W</u>	Vellesley	State MA	Zip Code 02482	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
feo Na Kr	EC ID number of contributing deral political committee. ame of Employer raematon Group eceipt For: Primary General Other (specify) ▼	Occupation Presiden Aggregate		Receipt 250.00
B. Na Ma	ull Name (Last, First, Middle Initial) ancy Steinmann ailing Address 220 Boylston St. ity oston EC ID number of contributing deral political committee. ame of Employer	State MA C	Zip Code 02116	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Re	eceipt For: Primary General Other (specify)	Retired	e Year-to-Date ▼ 2000.00]
C: WMA	exington EC ID number of contributing deral political committee. ame of Employer	State MA C	Zip Code 02420	Date of Receipt M M M / D D / Y Y Y Y Y O 1 1 1 2 0 1 1 Transaction ID: 10211.C187476 Amount of Each Receipt this Period 200.00 Receipt
Ko	eceipt For: Primary General Other (specify)	Lawyer	e Year-to-Date ▼ 200.00	
SUB	STOTAL of Receipts This Page (optional))	1450.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate for each cate Detailed Sur		FOR LINE NUMBER: PAGE 13 / 31 (check only one) X			
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may not be sold or using the name and address of any poli	used by any perso tical committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Massachusetts Republican St	ate Congressional Committee					
Full Name (Last, First, Middle Initia Michael Torrisi)		Date of Receipt			
City <u>Andover</u>	State Zip Code MA 01810		Transaction ID: 10211.C187821 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		100.00			
Name of Employer Torrisi & Torrisi LLC	Occupation Attorney		Receipt			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	200.00				
Full Name (Last, First, Middle Initia Arthur Turner			Date of Receipt			
Mailing Address PO Box 543	Mailing Address PO Box 543					
City	State Zip Code		Transaction ID: 10211.C187495			
Carlisle	MA 01741		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		110.00			
Name of Employer Retired	Occupation Retired		Receipt			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	310.00				
Full Name (Last, First, Middle Initia C. Henry Weaver)		Date of Receipt			
City	State Zip Code		Transaction ID: 10211.C187765			
Lexington FEC ID number of contributing federal political committee.	MA 02421	•	Amount of Each Receipt this Period 200.00			
Name of Employer Retired	Occupation Retired					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	500.00				
SUBTOTAL of Receipts This Page (c	ptional)		410.00			
	e number only)	·				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 31 (check only one) X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	name and add	dress of any political committee to	n for the purpose of soliciting contributions
∠ 4 .	Full Name (Last, First, Middle Initial) D Wetherell Mailing Address 221 Mount Auburn St	Date of Receipt		
	City Cambridge FEC ID number of contributing	State MA	Zip Code 02138	Transaction ID: 10211.C187793 Amount of Each Receipt this Period 200.00
	Receipt For: Primary Other (specify)	Occupatio Informati	n ion Requested e Year-to-Date ▼ 420.00	Receipt
_ 3.	Full Name (Last, First, Middle Initial) Linnea Willman Mailing Address 237 Main St. Apt. A6	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City Reading FEC ID number of contributing federal political committee.	State MA	Zip Code 01867	Transaction ID: 10211.C187962 Amount of Each Receipt this Period 121.00
	Name of Employer Unemployed Receipt For: Primary General Other (specify) ▼	Occupatio Unemplo Aggregate		Receipt
-).	Full Name (Last, First, Middle Initial) Jane Winchester Mailing Address 18 Meadow Lane			Date of Receipt
	City Greenfield FEC ID number of contributing federal political committee.	State MA	Zip Code 01301	Transaction ID: 10211.C187587 Amount of Each Receipt this Period 100.00
	Name of Employer Retired Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupatio Retired Aggregate	e Year-to-Date ▼ 200.00	Receipt
	SUBTOTAL of Receipts This Page (optional)		>	421.00
	TOTAL This Period (last page this line number	only))	

A.

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 15/31 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Full Name (Last, First, Middle Initial) Date of Receipt Verizon Mailing Address P.O. Box 1 11 2011 City Zip Code State Transaction ID: 10211.C187499 Worcester MA 01654 Amount of Each Receipt this Period FEC ID number of contributing C 717.10 federal political committee. Receipt Name of Employer Occupation Receipt For: Aggregate Year-to-Date Primary General 717.10 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	717.10
TOTAL This Period (last page this line number only)	→	17853.10

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER: PAGE 16/31					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 3				
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressi	onal Committee							
Full Name (Last, First, Middle Initial) Byte Bulb			Transaction ID: Date of Disbursen	nent				
Mailing Address The Trimount Company, I 75 Meadowbrook RD.	nc.		0 1 M / D 1 1	2011				
Hanover N	State Zip Code MA 02339		Amount of Each D	Disbursement this Period				
Purpose of Disbursement tech support Candidate Name		Category/		50.00				
	nent For: Primary General Other (specify)	Туре						
Full Name (Last, First, Middle Initial) Byte Bulb			Transaction ID: Date of Disbursen	nent				
Mailing Address The Trimount Company, I 75 Meadowbrook RD.	nc.		01 11					
,	State Zip Code MA 02339		Amount of Each D	Disbursement this Period				
Purpose of Disbursement tech support				30.00				
Candidate Name		Category/ Type						
	nent For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial) DirecTV DirecTV			Transaction ID: Date of Disbursen	nent				
Mailing Address PO Box 60036			01 25	2011				
	State Zip Code CA 90060		Amount of Each D	Disbursement this Period				
Purpose of Disbursement cable tv Candidate Name		Category/		49.34				
Office Sought: House Disburser	nent For-	Type						
Senate	Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)				129.34				
TOTAL This Period (last page this line number only) .								

SCHEDULE B (FEC Form 3X)		rate schedule(s)		OR LINI	NE NUMBER: PAGE 17/31							
TEMIZED DISBURSEMENTS		ategory of the Summary Page	X	_	22 28		23 28b	Н	24 28c	25 29		26
Any Information copied from such Reports and State												
or for commercial purposes, other than using the nar	ne and addres	is of any political	commi	ttee to s	olicit co	ntrib	utions fr	om s	such c	ommittee)	
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congres	scional Com	mittoo										
Massachusetts Hepublican State Congres	ssional Com	iiiiiiiiiee										
Full Name (Last, First, Middle Initial)					Tra	ınsa	ction ID:	: 1	0211.	.E12834	1	
American Express							Disburs		nt			
Mailing Address PO Box 1270					O		/ D	1	/ Y	ž 0 1	1 Y	
City	State	Zip Code			Am	nount	t of Each	Dis	burser	ment this	Peri	od
Newark	NJ	71011				-	• •			2450.4	2	_
Purpose of Disbursement credit card			,	-						3459.4	٠,٥	_
Candidate Name			Cate	gory/								
			Ту									
Office Sought: House Disburs	sement For:				1							
Senate	Primary	General										
State: President State:	Other (spec	сіту) 🔻										
Full Name (Last, First, Middle Initial)					-				0011	E40044		_
Anthony Ferrucci							ction ID: Disburs		-	E12813	3	
-					N	1 M	/ D	D	/ Y	ž 0 1	Y	
Mailing Address 62 Dwight St. Apt. #1					0	į.) 4		201	L	
City	State	Zip Code			Am	nount	of Each	Dis	burser	ment this	Peri	od.
Brookline	MA	02446										
Purpose of Disbursement				-						22.0	Ó	_
reimbursement Candidate Name			0.11									
Carididate Name			Cate Ty									
Office Sought: House Disburs	sement For: Primary	General		<u>r - </u>								
President	Other (spec	cify) 🔻										
State: District:												
Full Name (Last, First, Middle Initial) Anthony Ferrucci					Da	te of	Disburs	eme	nt	.E12814		
Mailing Address 62 Dwight St. Apt. #1					0	1 M	/ ^D C	6	/ Y	ž 0 1	1	
City Brookline	State MA	Zip Code 02446			Am	nount	t of Each	Dis	burser	ment this	Peri	od
	IVIA	U2440 			$+$ Γ					630.6	9	
Purpose of Disbursement payroll						-		0			-	_
Candidate Name			Cate Ty									
Senate President	sement For: Primary Other (spec	General cify) ▼										
State: District:					<u> </u>							_
SUBTOTAL of Disbursements This Page (optional))				Ę					4112.1	2	_
TOTAL This Period (last page this line number only	/)			•								
6AN026						FEC	Schedu	le B	(Forr	n 3X) (R	evise	ed C

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and dadrood or any pointed		
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 10211.E12817
Anthony Ferrucci			Date of Disbursement
Mailing Address 62 Dwight St. Apt. #1			$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 1 & 0 \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} \ $
	State Zip Code		Amount of Each Disbursement this Period
Brookline Purpose of Disbursement	MA 02446		630.68
payroll			
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	
Senate	Primary General		
State: District:	Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Turne 10 10 10011 F10010
Kaitlyn Greeley			Transaction ID: 10211.E12819 Date of Disbursement
Mailing Address 34 Fresno St.			$\begin{bmatrix} M & M \\ 0 & 1 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 0 & 6 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
Mailing Address 34 Fresno St.			0, 00 .201.
City Boston	State Zip Code MA 02131		Amount of Each Disbursement this Period
Purpose of Disbursement	WA 02101		968.63
payroll			
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate	ement For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Kaitlyn Greeley			Transaction ID: 10211.E12821 Date of Disbursement
			0 1
Mailing Address 34 Fresno St.			01 19 2011
City Boston	State Zip Code MA 02131		Amount of Each Disbursement this Period
Purpose of Disbursement	1VIA 02131		968.64
payroll			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ement For:	. 160	
Senate	Primary General		
State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			2567.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)				NE NUMBER: PAGE 19/31							81
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page		X	eck only 21b 27	22 23 24 25 28a 28b 28c 29					26		
Any Information copied from such Reports and State													
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and addres	ss of any political	con	ımıtte	e to so	icit conti	ributi	ons tr	om	sucn c	omn	nittee	
Massachusetts Republican State Congres	sional Con	nmittee											
Full Name (Last, First, Middle Initial) Matthew Keswick								on ID sburs		10211 ent	.E1	2798	
Mailing Address 231 Victory Road						0 ^M 1	М	D () ^D	/ Y	ž	0 1 1	Y
City North Quincy	State MA	Zip Code 02171				Amou	ınt of	Each	n Dis	sburse	-		
Purpose of Disbursement consulting						L.					30	00.00	
Candidate Name				atego Type									
Senate President	ement For: Primary Other (spe	General ecify) ▼											
State: District:													
Full Name (Last, First, Middle Initial) Matthew Keswick						Date	of Di	sburs	eme	10211 ent			
Mailing Address 231 Victory Road						0 ^M 1	М		25	/ L	ž	0 1 1	Y
City North Quincy	State MA	Zip Code 02171				Amou	unt of	Each	n Dis	sburse	-		
Purpose of Disbursement consulting											36	91.00	
Candidate Name				atego Type	-								
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ▼											
Full Name (Last, First, Middle Initial) Nathan Little								on ID sburs		10211 ent	.E1	2823	
Mailing Address 83 Congreeve						0 ^M 1	М	D (06	/ Y	ž	0 1 1	Y
City Boston	State MA	Zip Code 02131				Amou	unt of	Each	n Dis	sburse	men	t this F	eriod
Purpose of Disbursement payroll						L.					21	76.57	
Candidate Name				atego Type	-								
Senate President	ement For: Primary Other (spe	General ecify) ▼											
State: District:									_				
SUBTOTAL of Disbursements This Page (optional)						Ŀ		-	-		886	37.57	
TOTAL This Period (last page this line number only)				•								

CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		FOR LINE (check on	E NUMBER: PAGE 20 / 3					31		
EMIZED DISBURSEMENTS		category of the Summary Page	l e	X 21b 27	22 23 24 25				25 29	П		
ny Information copied from such Reports and State for commercial purposes, other than using the nan												3
NAME OF COMMITTEE (In Full)	ne and addres	ss or any political of	COITH	millee to so	DIICIL CON	tribu	lioris	ITOI	n such (COMM	iiilee	
Massachusetts Republican State Congres	ssional Con	nmittee										
Full Name (Last, First, Middle Initial)												
Nathan Little					Date	of D	isbur	rsen				
Mailing Address 83 Congreeve					0 ^M 1	М	/ [1 9		ž	0 1 1	Y
City Boston	State MA	Zip Code 02131			Amo	unt c	of Eac	ch C	Disburse	emen	t this F	Perio
Purpose of Disbursement payroll										21	76.58	3
Candidate Name				tegory/ ype								
Senate President	ement For: Primary Other (spe	General										
State: District:												
Full Name (Last, First, Middle Initial) Magan Munson					Date	of D	isbur	rsen				
Mailing Address 209 bunker hill st Apt 1					0 ^M 1	М	/ [0 4	1 '	ž	0 1 1	Y
City Boston	State MA	Zip Code 02129			Amo	unt c	of Eac	ch C	Disburse			
Purpose of Disbursement										1.	40.00)
reimbursement Candidate Name				tegory/ Type								
Office Sought: House Senate President State: Disburs	sement For: Primary Other (spe	General cify) ▼		Jpc								
Full Name (Last, First, Middle Initial)					Tran	eact	ion I	n.	10211	E11	2804	
Magan Munson							isbur	rsen	nent		_004	
Mailing Address 209 bunker hill st Apt 1					0 ^M 1	М	/ [0 4	1 /	ž Ž	0 1 1	Y
City Boston	State MA	Zip Code 02129			Amo	unt c	of Eac	ch C	Disburse	-		_
Purpose of Disbursement payroll										3	37.20)
Candidate Name				tegory/ ype								
Office Sought: House Senate President Disburs	ement For: Primary Other (spe	General cify) ▼										
State: District:												
						-	-			265	-	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		IE NUMBER: PAGE 21/31					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 28 28b	24 25 26 28c 29 30l				
Any Information copied from such Reports and State or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congre	ssional Committee							
Full Name (Last, First, Middle Initial) Magan Munson			Transaction ID: 1 Date of Disburseme					
Mailing Address 209 bunker hill st Apt 1			01 06	['] 20111 [']				
City Boston	State Zip Code MA 02129		Amount of Each Dis	bursement this Period				
Purpose of Disbursement payroll Candidate Name		Category/		1454.86				
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼	Туре						
Full Name (Last, First, Middle Initial) Magan Munson			Transaction ID: 1 Date of Disburseme	ent				
Mailing Address 209 bunker hill st Apt 1			01 7 19	Y 2011				
City Boston	State Zip Code MA 02129		Amount of Each Dis	bursement this Period				
Purpose of Disbursement payroll		•		1451.86				
Candidate Name		Category/ Type						
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial) OBrien Inc OBrien Communicatio			Transaction ID: 1 Date of Disburseme	ent				
Mailing Address PO Box 659			01 / 25	ŽOŽI				
City Wrentham	State Zip Code MA 02093		Amount of Each Dis	bursement this Period				
Purpose of Disbursement phone support Candidate Name		Category/ Type		155.00				
Office Sought: Senate President State: Disbur	sement For: Primary General Other (specify) ▼							
SUBTOTAL of Disbursements This Page (optional)			3061.72				
TOTAL This Period (last page this line number onl								

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s))		R LIN		UMBE	R:	PAGE 22/31						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 2	ck oi 21b 27		22 28a	$\boldsymbol{\sqsubseteq}$	23 28b	24 28c	F	25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			any pe	ersor		the pu	ırpose	of so	oliciting c		butions			
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congress	sional Committee													
Full Name (Last, First, Middle Initial) Advantage Payroll Services						Date	of Dis	burse		I.E1	2808			
Mailing Address 747 Main Street #222		011 04 7 2011												
,	State Zip Code cord MA 01742											Period		
Purpose of Disbursement payroll											95.41			
Candidate Name			itegor Type	y/										
Senate President	ement For: Primary General Other (specify)													
State: District:					+									
Full Name (Last, First, Middle Initial) Advantage Payroll Services						Date	of Dis	burse		I.E1	2809			
Mailing Address 747 Main Street #222						0 ^M 1	M /	0	6 /	Ž	01	ı		
,	State Zip Code MA 01742					Amou	ınt of I	Each	Disburse			-		
Purpose of Disbursement payroll								-		29	14.52	2		
Candidate Name			itegor Type	ry/										
Senate President	ement For: Primary General Other (specify)													
State: District:					+									
Full Name (Last, First, Middle Initial) Advantage Payroll Services						Date	of Dis	burse						
Mailing Address 747 Main Street #222						0 ^M 1	M /	^D 1	9 /	Ž	01	ı		
	State Zip Code MA 01742					Amou	ınt of I	Each	Disburse					
Purpose of Disbursement payroll						<u></u>				29	21.54			
Candidate Name			itegor Type	y/										
Senate President	ement For: Primary General Other (specify)													
State: District:														
SUBTOTAL of Disbursements This Page (optional) .				<u> </u>			•			59	31.47			

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)	7 .	LINE NUMBER: PAGE 23 / 31 k only one)										
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	_	22 28a	\mathbf{L}	23 28b	24 28c		25 29	П	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										S		
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee											
Full Name (Last, First, Middle Initial) Ox-eye Properties Mailing Address 119 South 14th St.				Date		burse	10211 ement		2816 0 1			
	Suite 300 ty State Zip Code											
Purpose of Disbursement rent Candidate Name	VA 23219	Cate	gory/		•			44	34.00)		
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Ту	pe									
Full Name (Last, First, Middle Initial) Ox-eye Properties Mailing Address 119 South 14th St. Suite 300						burse	10211 ement		2818 0 1			
City	State Zip Code VA 23219			Amou	unt of	Each	Disburse	emen	t this	Perio	d	
Purpose of Disbursement rent Candidate Name	20210	Cata	gory/					4	57.40)		
	ement For: Primary General Other (specify)	Ту										
Full Name (Last, First, Middle Initial) Michael Rigas				Date		burse	10211 ement		2826 0 1			
Mailing Address 24 Concord Ave, Apt 415				0 1				^				
City Cambridge Purpose of Disbursement reimbursement Candidate Name	State Zip Code MA 02138	Cate Ty	gory/	Amou	unt of	Each	Disburse	-	t this		d	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)											
SUBTOTAL of Disbursements This Page (optional)			<u> </u>					50 ⁻	12.50)		

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN		E NUMBER: PAGE 24 /								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	X 21b 27	22 28	<u> </u>	23	3 8b	24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			ny persor	n for the	pur	pose (of so	oliciting co		outions			
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	ional Committee												
Full Name (Last, First, Middle Initial) Michael Rigas													
Mailing Address 24 Concord Ave, Apt 415	iling Address 24 Concord Ave, Apt 415												
,	State Zip Code idge MA 02138												
Purpose of Disbursement payroll	02100			† L					15	38.38	3		
Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial)				Tre	nca	otion	יחו.	10211	E 1	2020			
Michael Rigas					ate of	f Disb	urse	ement			Y		
Mailing Address 24 Concord Ave, Apt 415				0	1		1	9 /	2	01	1		
,	State Zip Code MA 02138			An	noun	t of E	ach	Disburse					
Purpose of Disbursement payroll						-			15	38.37	7		
Candidate Name			tegory/ ype										
Senate President	ment For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Direct Mail Systems				Da	ate of	Disb	urse	10211 ement					
Mailing Address 12450 Automobile Boule	/ard				1	/	0	^D 4	Ž	0 1 1	1		
	State Zip Code FL 33762			An	noun	t of E	ach	Disburse	-	-			
Purpose of Disbursement direct mail									16	83.00)		
Candidate Name			tegory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)												
State: District:	· 												
SUBTOTAL of Disbursements This Page (optional)			▶						47	59.75	5		

TOTAL This Period (last page this line number only)

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s) Check only	NUMBER: PAGE 25/31
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 2 28a 28b 28c 29
ny Information copied from such Reports and Star for commercial purposes, other than using the r			
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congr	ressional Committee		
Full Name (Last, First, Middle Initial) Union Club- Boston The Union Club			Transaction ID: 10211.E12820 Date of Disbursement
Mailing Address 8 Park Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} N & P \\ O & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & I \end{bmatrix} \ Y$
City Boston	State Zip Code MA 02108		Amount of Each Disbursement this Perio
Purpose of Disbursement event fee			901.48
Candidate Name		Category/ Type	
Senate President	ursement For: Primary Genera Other (specify) ▼	I	
State: District: Full Name (Last, First, Middle Initial)			- " 'P 40044 F4000F
Bank of America			Transaction ID: 10211.E12835 Date of Disbursement
Mailing Address 104 Canal Street			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} M & M \\ O & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} M & M \\ O & M \end{smallmatrix} \end{bmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
City Boston	State Zip Code MA 02114		Amount of Each Disbursement this Perio
Purpose of Disbursement processing fees			212.44
Candidate Name		Category/ Type	
Office Sought: House Disb Senate President	ursement For: Primary Genera Other (specify) ▼	ı	
State: District: Full Name (Last, First, Middle Initial)			T .: ID 10011 F10005
Blue Cross Blue Shield of Massachuset	ts		Transaction ID: 10211.E12825 Date of Disbursement
Mailing Address Landmark Center 401 Park Drive			01 11 2011
City Boston	State Zip Code MA 02215	1	Amount of Each Disbursement this Period 5886.30
Purpose of Disbursement health insurance			3000.00
Candidate Name		Category/ Type	
Office Sought: House Disb Senate President	ursement For: Primary Genera Other (specify) ▼	I	
State: District:			

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)										PR LINE NUMBER: PAGE 26 / 31 neck only one)										
ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27	F	22 28a		23 28b		24 28c		25 29	$\mathbf{\square}$	26 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							the pu		se of s		iting co			\blacksquare							
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Com	nmittee																			
Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140							Trans Date o		isburs		ent		2801 0 1 1	Y							
•	State TN	Zip Code 38101					Amou	nt o	f Each	n Dis	sburse	-	-		T.						
Purpose of Disbursement shipping Candidate Name					egory/				•				27.68		_						
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼																			
Full Name (Last, First, Middle Initial) Federal Express Mailing Address PO Box 1140							Trans Date of		isburs		-		2802 0 1 1	Y							
	State	Zip Code						nt o			sburse										
Memphis Purpose of Disbursement	TN	38101	_	_				_		•			20.68								
shipping Candidate Name					egory/										_						
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼		- ,																	
Full Name (Last, First, Middle Initial) Federal Express							Trans Date of					.E1	2807								
Mailing Address PO Box 1140							0 ^M 1	М	[/] 1	I 1	/ Y	ž	0 1 1	Y							
	State TN	Zip Code 38101					Amou	nt o	f Each	n Dis	sburse				t t						
Purpose of Disbursement shipping					·		L.		•				13.84		_						
Candidate Name					egory/ /pe																
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼																			
State: District:		· 						_							_						
SUBTOTAL of Disbursements This Page (optional) .					. •							. (62.20								

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		E NUMBER:		PAGE 27/31						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check of	22 23	3 🔲 2	4	25	26				
A Life with the control of the contr		27			8c	29	30b				
Any Information copied from such Reports and State or for commercial purposes, other than using the nar							S				
NAME OF COMMITTEE (In Full)											
Massachusetts Republican State Congres	ssional Committee										
Full Name (Last, First, Middle Initial) Federal Express			Transaction Date of Disb	_	211.E	12810					
Mailing Address PO Box 1140			01 /	25	Y	ž 0 1	1 Y				
City Memphis	State Zip Code TN 38101		Amount of E	ach Disb	ırseme	ent this	Period				
Purpose of Disbursement shipping		v v				61.5	5				
Candidate Name		Category/ Type									
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)			Transaction	n ID : 10	211.E	12837					
FLS Connect	Date of Disbursement O 1 D D D Y Y Y O Y Y Y O Y Y Y O Y O Y O Y										
Mailing Address 7300 Hudson Blvd. Ste											
City Saint Paul	State Zip Code MN 55128		Amount of E	ach Disbu							
Purpose of Disbursement telemarketing		•			12	946.9	5				
Candidate Name		Category/ Type									
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)			Transaction	ID: 10:	211 F	12832					
Konica Minolta Business Systems			Date of Disb	oursement							
Mailing Address P.O. Box 7247-0322			01 /	11	Y	ž 0 ĭ	1 ^Y				
City Philadelphia	State Zip Code PA 19170		Amount of E	ach Disbu		-					
Purpose of Disbursement printing	782.83										
Candidate Name		Category/ Type									
Senate President	ement For: Primary General Other (specify)										
State: District:			<u> </u>								
SUBTOTAL of Disbursements This Page (optional)		>			13	791.3	3				

	CHEDULE B (FEC Form 3.	² Use sepa	arate schedule(s)	FOR LINE	
IT	EMIZED DISBURSEMENT	S for each of	category of the Summary Page	(check only	⁷ one) ☐ 22
				27	28a 28b 28c 29
An	y Information copied from such Reports ar for commercial purposes, other than using	nd Statements may no the name and addres	ot be sold or used	by any person for committee to sol	or the purpose of soliciting contributions
<u>~</u>	NAME OF COMMITTEE (In Full)	the hame and address	oo or arry porition		
\rangle	Massachusetts Republican State C	ongressional Com	nmittee		
	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems				Transaction ID: 10211.E12833 Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address P.O. Box 7247-03	322			01 25 2011
	City Philadelphia	State PA	Zip Code 19170		Amount of Each Disbursement this Period
	Purpose of Disbursement				533.03
	printing Candidate Name			Category/	
				Type	
	Office Sought: House Senate	Disbursement For: Primary	General		
	President	Other (spe			
	State: District: Full Name (Last, First, Middle Initial)				
	Sprint/Nextel				Transaction ID: 10211.E12836 Date of Disbursement
	Mailing Address PO Box 17990				$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 0 & 1 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 5 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	City Denver	State CO	Zip Code 80217		Amount of Each Disbursement this Period
	Purpose of Disbursement cell phone		00217	• •	220.40
	Candidate Name			Category/ Type	
	Senate President	Disbursement For: Primary Other (spe	General cify) ▼	7,7,12	
	State: District:				
	Full Name (Last, First, Middle Initial) Staples, Inc.				Transaction ID: 10211.E12812 Date of Disbursement
	Mailing Address Staples Credit Pl Dept. 80 - 00889				$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ O & 1 & M \end{smallmatrix} & \begin{smallmatrix} I & D & O & D \\ O & 4 & I & I & I & I \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Y & 2 & 0 & 1 & 1 \end{bmatrix}$
	City Des Moines	State IA	Zip Code 50368		Amount of Each Disbursement this Period
	Purpose of Disbursement office supplies			· ·	180.20
	Candidate Name			Category/ Type	
	Senate	Disbursement For: Primary Other (spe	General		
	President	u (-p			
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State:

A.

District:

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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			R LINI eck or	 NUMBER:					PAGE 29/31				
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X	21b 27	22 28a		23 28b	Н	24 28c		25 29	Н	26 30b	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												;		
\	NAME OF COMMITTEE (In Full)														
	Massachusetts Republican State Congress	sional Committee													
	Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 1					Trans Date of		sburse		-		2822 0 1 1	Y		
	•	State Zip Code MA 01654				Amou	nt of	f Each	Dis	burse	nen	t this F	Perio	od	
	Purpose of Disbursement phone service					<u></u>	_				6	83.46			
	Candidate Name		_	teg yp	ory/ e										
	Office Sought: House Disburse Senate President	ement For: Primary Other (specify)													

		600.46
SUBTOTAL of Disbursements This Page (optional)	>	683.46
TOTAL This Period (last page this line number only)	•	59567.04

PAGE 30 / 31 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original Debt for telemar-keting non-fea **FLS Connect** Mailing Address 7300 Hudson Blvd. Ste City State ZIP Code Saint Paul MN 55128 Outstanding Balance Beginning This Period Transaction ID: LS91217.E11763 3910.20 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 3910.20 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11275 250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 250.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 State ZIP Code City Philadelphia PΑ 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11276 250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 250.00 4410.20 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 31 / 31 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Original debt for research party related Lexis-Nexis Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11277 1250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1250.00 0.00 0.00 1250.00 1) SUBTOTALS This Period This Page (optional)..... 5660.20 2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

0.00

5660.20